Appl. No. 09,682,852 Amdt. Dated 16 July 2004 Reply to Office action of May 25 2004

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I hereby certify that this correspondence is being facsimile transmitted to the Central Facsimile Number (703) 872-9308 on 16 July 2004 (Date). (6 pages total-including 1 page for transmittal sheet)
Typed or printed name: Ann M. Agosti. Signature: C. M. G. t.

Appl. No. Applicant

Filed

: 09/682,00= : Shah et al. : 24 October 2001 : Fault Current Limiter : 2832

Title TC/A.U. Examiner

Docket No. Customer No. : RD29526

6147

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

AMENDMENT UNDER 37 CFR 1.116

In response to the Office action of 25 May 2004, please amend the above-identified application as follows.

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 5 of this paper.

Jul <u>e</u> 16 2004 1	[3:21 FR GE CORFG		ATTO	RNEY'S DOCKET NO.
AM	RD	-29,256-1 GROUP ART UNITE		
	FILING DATE	EXAMINER		2832
SERIAL NO. 09/682,852	10/24/01	A. MAI		

IN RE APPLICATION OF MANOJ R. SHAH, ET AL.

FOR FAULT CURRENT LIMITER

TO THE ASSISTANT COMMISSIONER FOR PATENTS:

Transmitted herewith is an amendment in the above-identified application. The fee has seen calculated as shown below.

Transmitted herewith is an amendment in the above-identified application. The tee has seen that the tee has seen the tee has								
(1)	(2) CLAIMS REMAINING	(3)		(5) NO. OF EXTRA CLAIMS PRESENT.	RATE	ADDITIONAL FEE		
	AFTER AMENDMENT	MINUS	62 "	O O	X \$18.00	\$0.00		
TOTAL CLAIMS	9	MINUS	02	5	X \$86.00	\$430.00		
INDEP. CLAIMS	8	PENDENT	CLAIM(S),		X \$290.00			
ADDITIONAL FEE FOR USE OF MULTIPLE DEPENDENT CLAIM(S). ADDITIONAL FEE FOR USE OF MULTIPLE DEPENDENT CLAIM(S). TOTAL ADDITIONAL FEE FOR THIS AMENDMENT S430.00								
			FOR ITTO					

^{*} If the entry in column 2 is less than the entry in column 4, write "0" in column 5.

ice.		to my Deposit Account No. 07-086	8.
Nease charge	\$430.00	to my Deposit Account No. 9-111	

The Assistant Commissioner is hereby authorized to charge all required fees under 37 C.F.R. 1.16 or 1.17 or credit any overpayment to Deposit Accoun: No. 07-0868.

Three copies of this sheet are enclosed.

Telephone No. (518) 387-7713 or (518) 387-7122

command to Attorney or agent of record ANN M. AGOSTI

Reg. No. 3",372

CRD Pat. Form 3a (7/19/01)

^{**} If the "Highest Number Previously Paid For" IN THIS SPACE in less than 20, write "20"

^{***} If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.